

# Rhoi organau a meinwe



Atebion i'ch  
cwestiynau

I gael rhagor o wybodaeth:

**0300 123 23 23**

[www.organdonation.nhs.uk](http://www.organdonation.nhs.uk)

## Rhoi organau a meinwe – atebion i'ch cwestiynau.

Trawsblaniadau yw un o lwyddiannau mwyaf gwyrthiol meddygaeth fodern. Ond maent yn gwbl ddibynol ar haelioni rhoddwyr a'u teuluoedd sy'n barod i roi rhodd a fydd yn achub neu'n trawsnewid bywyd rhywun arall.

Gall un rhoddwr achub bywydau nifer o bobl, adfer golwg dau unigolyn arall a gwella ansawdd bywyd llawer mwy. Po fwyaf o bobl sy'n cytuno i roi eu horganau a'u meinwe ar ôl marw, mwyaf o bobl fydd yn elwa. Drwy ddewis ymuno â Chofrestr Rhoddwyr Organau'r GIG, gallech chi helpu i sicrhau bod bywyd yn mynd yn ei flaen i lawer o bobl eraill.

Mae ymuno â'r gofrestr yn cofnodi eich caniatâd i gael defnyddio eich organau a meinwe ar gyfer eu trawsblannu ar ôl i chi farw.

Pan fyddwch chi'n cofrestru, mae'n bwysig eich bod chi'n dweud wrth y bobl sydd agosaf atoch chi am eich penderfyniad.

Mae penderfynu a ydych chi am fod yn rhoddwr ar ôl i chi farw yn rhywbeth personol iawn ac mae'n bwysig bod pawb yn gwneud ei benderfyniad ei hun. Mae'r llyfryn hwn yn ateb y cwestiynau mwyaf cyffredin a ofynnir am roi organau a meinwe ac mae'n ceisio tawelu unrhyw amheuan a all fod gennych ynglŷn â gadael rhodd o fywyd i eraill ar ôl i chi farw.

## Cynnwys

1	Beth yw rhoi organau?	1
2	Pryd digwyddodd y trawsblaniadau organ cyntaf?	1
3	Pa organau y gellir eu trawsblannu?	1
4	Beth mae rhoi meinwe'n ei olygu?	1
5	A yw ymuno â Chofrestr Rhoddwyr Organau'r GIG yn golygu fy mod yn cytuno i roi fy wyneb neu fy mreichiau a'm coesau i gael eu trawsblannu?	2
6	Pam mae angen mwy a mwy o roddwyr?	2
7	Sut byddan nhw'n gwybod eich bod chi wedi marw go iawn?	2
8	A ydyn nhw'n gallu eich cadw chi'n fyw ar beiriannau?	3
9	A fyddan nhw'n gadael i chi farw os ydyn nhw'n gwybod eich bod chi am roi'ch organau?	3
10	A alla i roi organau neu feinwe os bydda i'n marw yn yr uned frys?	3
11	A allwch chi roi organ tra'ch bod chi'n dal yn fyw?	3
12	Pam mae angen i mi benderfynu a ydw i am fod yn rhoddwr?	4
13	Beth yw Cofrestr Rhoddwyr Organau'r GIG?	4
14	A oes angen i mi gofrestru os oes gen i gerdyn rhoddwr?	5
15	A fydd fy enw a'm cyfeiriad yn cael eu rhoi i sefydliadau eraill?	5
16	Dydw i ddim yn siŵr a wyf fi wedi cofrestru'n barod, beth ddylwn i ei wneud?	5
17	Pwy fyddai'n cael fy organau a fy meinwe petawn i'n penderfynu bod yn rhoddwr?	5
18	A fydd rhoddwyr yn cael eu sgrinio i weld a oes ganddynt glefyd trosglwyddadwy?	5
19	A alla i fod yn rhoddwr os oes gennyf gyflwr meddygol ar hyn o bryd?	5
20	A alla i fod yn rhoddwr os cafodd fy nghynniog i roi gwaed ei wrthod?	6
21	Pwy a all ymuno â Chofrestr Rhoddwyr Organau'r GIG?	6
22	Beth fydd yn digwydd os gwnaeth fy rheini, fy ngwarcheidwad neu rywun sydd â chyfrifoldeb rhiant dros fy nghofrestru pan oeddwn yn ifanc, heb yn wybod i mi?	6
23	A all pobl hŷn fod yn rhoddwyr?	6
24	A oes gwrthwynebiadau crefyddol i roi organau a meinweoedd?	7
25	A yw lliw fy nghroen yn gwneud gwahaniaeth?	7

26	Os oes ar rywun angen dirfawr am organ, a oes unrhyw bwrpas mewn gwneud apêl arbennig?	7
27	A alla i gytuno i roi rhai organau neu feinweoedd a pheidio â rhoi rhai eraill?	7
28	A alla i gytuno i roi i rai pobl a ddim i eraill?	7
29	A allai fy organau a meinweoedd gael eu rhoi i glaf preifat?	8
30	A yw bod yn rhoddwr yn golygu oedi yn nhrefniadau'r angladd?	8
31	A all fy organau neu feinwe gael eu rhoi i rywun mewn gwlad arall?	8
32	A yw rhoi organau a meinweoedd yn golygu y bydd y corff yn cael ei anffurfio?	8
33	A fydd modd gweld y corff wedyn?	8
34	A oes yn rhaid i deulu'r rhoddwr dalu am gost y llawdriniaeth?	9
35	A fydd y GIG yn talu costau'r angladd?	9
36	Mae perthynas i mi am fod yn rhoddwr. Beth fydd angen i mi ei wneud ar ôl iddynt farw?	9
37	A fydd yr organau neu'r meinweoedd sy'n cael eu rhoi ar gyfer eu trawsblannu yn cael eu defnyddio at ddibenion ymchwil?	9
38	Beth yw'r gwahaniaeth rhwng rhoi organau a chadw organau?	9
39	A alla i adael fy nghorff ar gyfer addysg neu ymchwil feddygol ar ôl i mi roi fy organau?	9
40	A oes modd i deulu'r rhoddwr gael gwybod pwy oedd y derbynydd?	10
41	Pam dylwn i drafod fy nymuniadau gyda'm teulu?	10
42	Beth fyddai'n digwydd petai fy nheulu yn gwrthwynebu?	10
43	Beth fydd yn digwydd os nad oes gen i deulu na pherthnasau eraill?	11
44	Beth yw perthynas gymwys?	11
45	A ddylwn i roi fy nymuniadau yn fy ewyllys?	11
46	A alla i newid fy meddwl?	11
47	A all rhywun sydd wedi marw roi sberm neu wyau i'w defnyddio rywbryd yn y dyfodol?	11
48	A all pobl brynu neu werthu organau?	11
49	Hoffwn i roi gwaed, beth dylwn i ei wneud?	11
50	Mae gen i ddiddordeb mewn rhoi mēr esgyrn, beth dylwn i ei wneud?	12

## 1. Beth yw rhoi organau?

Mae rhoi organ yn rhodd o organ i helpu rhywun y mae angen trawsblaniad arno. Mae haelioni rhoddwyr a'u teuluoedd yn galluogi mwy na 3,000 o bobl yn y DU bob blwyddyn i ailafael yn eu bywydau.

## 2. Pryd digwyddodd y trawsblaniadau organ cyntaf?

Trawsblannwyd aren yn llwyddiannus am y tro cyntaf yn 1954. Trawsblannwyd y galon gyntaf yn 1967.

## 3. Pa organau y gellir eu trawsblannu?

Gellir trawsblannu arenau, y galon, iau neu afu, ysgyfaint, pancreas a'r coluddyn bach.

Mae'r technegau yn gwella drwy'r amser a chyn bo hir efallai bydd modd i ni drawsblannu rhannau eraill o'r corff i helpu mwy fyth o bobl.

## 4. Beth mae rhoi meinwe'n ei olygu?

Mae rhoi meinwe yn golygu rhoi meinwe fel cornbilennau, croen, esgyrn, tendonau, cartilagau a falfiau'r galon i helpu eraill.

Digwyddodd y trawsblaniad cornbilen llwyddiannus cyntaf yn 1905. Bob blwyddyn, bydd cornbilennau sy'n cael eu rhoi yn adfer golwg miloedd o bobl sydd ag afiechydon neu anafiadau difrifol i'w llygaid.

Defnyddir esgyrn, tendonau a chartilagau i ailadeiladu rhannau o'r corff ar ôl anaf neu ar ôl llawdriniaeth i roi cymalau newydd. Gall trawsblannu asgwrn olygu nad oes yn rhaid i gleifion sy'n dioddef o ganser yr esgyrn golli breichiau neu goesau.

Defnyddir falfiau'r galon i helpu plant sy'n cael eu geni â diffyg ar y galon ac oedolion sydd ag

afiechyd neu ddifrod i'w falgiau. Defnyddir impiadau croen i drin pobl â llosgiadau difrifol.

Gall y rhan fwyaf o bobl roi meinwe. Yn wahanol i organau, efallai fod modd rhoi meinwe hyd at 48 awr ar ôl i rywun farw.

Ni chymerir organau na meinweoedd atgenhedlu o bobl sydd wedi marw.

**“Alla i ddim diolch digon i'r rhoddwyr a'u perthnasau. Mae eu rhoddion wedi rhoi fy ngolwg yn ôl i mi ac wedi trawsnewid fy mywyd.”**

Derbynnydd cornbilen

#### **5. A yw ymuno â Chofrestr Rhoddwyr Organau'r GIG yn golygu fy mod yn cytuno i roi fy wyneb neu fy mreichiau a'm coesau i gael eu trawsblannu?**

Nac ydy. Byddai'n rhaid i ni gael cytundeb penodol ar gyfer y mathau hyn o roi – naill ai gennyh chi yn ystod eich oes neu gan eich perthynas agosaf ar ôl i chi farw. Dywedwch wrth y rhai agosaf atoch chi beth yw eich dymuniad.

#### **6. Pam mae angen mwy a mwy o roddwyr?**

Bob dydd bydd tri o bobl yn marw tra'u bod yn aros am drawsblaniad organ a bydd nifer o bobl eraill yn colli eu bywydau cyn iddynt gyrraedd y rhestr trawsblaniadau hyd yn oed. Mae prinder difrifol o organau ac mae'r bwch rhwng nifer yr organau sy'n cael eu rhoi a nifer y bobl sy'n aros am drawsblaniad yn cynyddu.

Mae trawsblaniadau'n llwyddiannus iawn ac mae disgwyl y bydd nifer y bobl y mae arnynt angen trawsblaniad yn cynyddu'n sydyn oherwydd bod y boblogaeth yn heneiddio, oherwydd y cynnydd mewn arenau sy'n methu ac oherwydd

datblygiadau meddygol sy'n golygu bod mwy a mwy o bobl yn gallu elwa o drawsblaniad.

Fodd bynnag, mae nifer yr organau sydd ar gael ar gyfer trawsblaniadau wedi aros yr un fath dros y pum mlynedd diwethaf. Dim ond nifer fach iawn o bobl sy'n marw mewn amgylchiadau lle maent yn gallu rhoi eu horganau. Gan fod yn rhaid trawsblannu organau'n fuan iawn ar ôl i rywun farw, dim ond pobl sydd wedi marw mewn ysbyty sy'n gallu rhoi eu horganau. Fel arfer daw organau o bobl sydd wedi eu cyhoeddi'n farw tra'u bod ar beiriant anadlu mewn adran gofal dwys mewn ysbyty, fel arfer o ganlyniad i waedlif ar yr ymennydd, damwain ddifrifol fel damwain car, neu strôc.

Mae nifer y bobl, yn enwedig pobl iau, sy'n marw mewn amgylchiadau fel hyn yn gostwng, yn bennaf oherwydd gwelliannau gwerthfawr mewn diogelwch ar y ffyrdd, datblygiadau meddygol wrth drin cleifion a dulliau o atal strociau ymhlith pobl ifanc.

Rheswm pwysig arall dros y prinder organau yw bod cymaint o bobl heb gofnodi eu dymuniad i roi organau nac wedi trafod y mater gyda'u teuluoedd. Nid oes digon o bobl wedi ymuno â Chofrestr Rhoddwyr Organau'r GIG nac wedi gwneud yn siŵr bod eu teuluoedd yn gwybod am eu dymuniadau.

Er mai dim ond ychydig o bobl sy'n marw mewn amgylchiadau a fyddai'n galluogi i'w horganau gael eu defnyddio, gall llawer o bobl roi meinwe ar ôl iddynt farw. Mae datblygiadau gwyddonol a meddygol yn y triniaethau sydd ar gael i gleifion wedi arwain at gynnydd yn yr angen am feinwe sy'n cael ei rhoi.

#### **7. Sut byddan nhw'n gwybod eich bod chi wedi marw go iawn?**

Dim ond ar ôl i rywun farw y bydd organau'n cael eu tynnu. Bydd marwolaeth yn cael ei

chadarnhau gan feddygon ar lefel ymgynghorol sy'n gwbl annibynnol ar y tîm trawsblannu. Bydd marwolaeth yn cael ei chadarnhau yn union yr un ffordd ar gyfer pobl sy'n rhoi organau ag y bydd yn achos pobl eraill.

Mae rhan fwyaf y rhoddwyr organau yn bobl sy'n marw o ganlyniad i waedlif ar yr ymennydd, anaf difrifol i'r pen neu strôc, ac sydd ar beiriant anadlu yn uned gofal dwys yr ysbyty. Yn yr amgylchiadau hyn bydd marwolaeth yn cael ei chadarnhau drwy wneud profion ar fôn yr ymennydd. Mae safonau a gweithdrefnau eglur a phendant iawn ar gyfer y prawf hwn ac fe'i cynhelir bob amser gan ddau feddyg profiadol.

Mae'r peiriant anadlu yn cynhyrchu ocsigen sy'n cadw'r galon i guro a'r gwaed i gylchredeg ar ôl marwolaeth. Gelwir y rhoddwyr hyn yn rhoddwyr curiad calon. Fel arfer bydd organau megis y galon, sy'n dirywio'n gyflym iawn heb gyflenwad ocsigen, yn cael eu rhoi gan roddwr curiad calon yn unig.

Gall cleifion sy'n marw yn yr ysbyty, ond nad ydynt ar beiriant anadlu, roi eu harenau mewn rhai amgylchiadau, ac mewn rhai amgylchiadau gallant hefyd roi organau eraill. Gelwir y rhain yn rhoddwyr heb guriad calon.

Gall rhoddwyr curiad calon a rhoddwyr heb guriad calon roi eu cornbilennau a meinweoedd eraill.

## **8. A ydyn nhw'n gallu eich cadw chi'n fyw ar beiriannau?**

Na allant. Mae'r claf wedi marw. Mae'r peiriant anadlu yn cynhyrchu ocsigen i'r corff ac mae hyn yn golygu y bydd y galon yn parhau i guro a chylchredeg gwaed. Mae hyn yn cadw'r organau'n iach er mwyn gallu eu trawsblannu. Pan fydd y peiriant anadlu'n cael ei ddiffodd bydd y galon yn rhoi'r gorau i guro ar ôl chydig funudau.

## **9. A fyddan nhw'n gadael i chi farw os ydyn nhw'n gwybod eich bod chi am roi'ch organau?**

Na fyddant. Mae gan feddygon ddyletswydd gofal i geisio achub bywyd yn gyntaf. Os, er gwaethaf eu holl ymdrechion, bydd y claf yn marw, gellir wedyn ystyried rhoi organau a meinwe a hynny gan dîm cwbl wahanol o arbenigwyr rhoi a thrawsblannu a fydd yn cymryd drosodd.

## **10. A alla i roi organau neu feinwe os bydda i'n marw yn yr uned frys?**

Mewn nifer gynyddol o ysbytai, gall cleifion sy'n marw yn yr uned frys roi organau, llygaid a meinwe.

## **11. A allwch chi roi organ tra'ch bod chi'n dal yn fyw?**

Gallwch, mewn rhai achosion. Mae prinder organau wedi golygu bod mwy a mwy o organau'n cael eu rhoi gan bobl sy'n fyw.

Yr organ sy'n cael ei rhoi amlaf gan bobl sy'n fyw yw arenau gan fod unigolyn iach yn gallu byw bywyd cwbl normal gyda dim ond un aren sy'n gweithio. Mae arenau sy'n cael eu trawsblannu o roddwyr byw yn fwy tebygol o oroesi dros y tymor hir na rhai sy'n cael eu trawsblannu o bobl sydd wedi marw. Mae nifer o resymau dros hyn, a'r prif reswm yw bod y rhoddwyr yn fyw ac yn iach. Mae pedwar deg y cant o'r holl drawsblaniadau organau yn dod gan roddwyr byw.

Gellir trawsblannu rhan o'r iau neu afu ac mae hefyd yn bosibl rhoi tamaid o ysgyfaint ac, mewn nifer fach iawn o achosion, rhan o'r coluddyn bach. Yn achos pob un o'r trawsblaniadau hyn o rywun byw, mae'n rhaid ystyried y risg i'r rhoddwr yn ofalus iawn. Cyn bwrw ymlaen â thrawsblaniad o rywun

byw mae'n rhaid cydymffurfio â rheoliadau caeth iawn a dilyn proses asesu a thrafod drylwyr dros ben.

Mae Deddf Meinweoedd Dynol 2004 a Deddf Meinweoedd Dynol (yr Alban) 2006 yn caniatáu dau fath newydd o roi aren gan roddwyr byw – rhodd wedi'i pharu a rhodd allgarol.

Mae rhoddwyr yn aml yn berthynas agos ond gallant hefyd fod yn unigolion nad ydynt yn perthyn ond sydd â pherthynas emosiynol agos â'r derbynnydd, fel partner neu ffrind agos. Weithiau ni fydd y rhoddwr a'r derbynnydd yn cydweddu â'i gilydd oherwydd y gwahaniaeth rhwng eu grŵp gwaed neu eu meinwe ac mewn achos o'r fath efallai y gellir paru gyda rhoddwr a derbynnydd arall sydd yn yr un sefyllfa. Mae hyn yn golygu y bydd y ddau dderbynnydd yn elwa o drawsblaniad na fyddai wedi bod yn bosibl fel arall (gelwir hyn yn rhodd wedi'i pharu). Pan fydd mwy na dau bâr yn rhan o drefniadau cyfnewid o'r fath, gelwir hyn yn rhodd wedi'i chyfuno. Gall rhoddwyr hefyd gynnig aren i rywun sydd ar y rhestr aros am drawsblaniad, er nad ydynt wedi cyfarfod yr unigolyn hwnnw o'r blaen (gelwir hyn yn rhodd allgarol heb ei chyfeirio).

Deddf Meinweoedd Dynol 2004 a sefydlodd yr Awdurdod Meinweoedd Dynol. Un o rolau'r Awdurdod Meinweoedd Dynol yw rheoleiddio trawsblaniadau rhoddwyr byw yn y DU.

**"Rydyn ni'n ddiolchgar i deulu'r rhoddwr, oherwydd pe na baen nhw wedi bod mor hael ac anhunanol ar ôl marwolaeth annhymig eu plentyn, ni fyddai fy mab yma heddiw."**

Rhieni bachgen tair oed a gafodd drawsblaniad coluddyn bach ac afu/iau.

Gallwch chi ddysgu mwy am fod yn rhoddwr aren byw drwy ddarllen ein taflen *Allwn i fod yn rhoddwr aren byw?* sydd ar gael drwy ffonio'r Llinell Gymorth Rhoddwyr Organau (0300 123 23 23) neu fynd i'r adran *How to become a donor* ar y wefan Rhoi Organau.

Os hoffech chi gael gwybod mwy am roddion pâr/cyfun neu allgarol heb eu cyfeirio, cysylltwch â'ch canolfan drawsblannu arenau agosaf. Mae manylion am ganolfannau trawsblannu arenau ar gael yn yr adran *About transplants* ar y wefan Rhoi Organau.

Cewch ragor o wybodaeth am waith yr Awdurdod Meinweoedd Dynol, gan gynnwys taflen ar drawsblaniadau rhoddwyr byw, ar eu gwefan: [www.hta.gov.uk/cymraeg.cfm](http://www.hta.gov.uk/cymraeg.cfm)

## 12. Pam mae angen i mi benderfynu a ydw i am fod yn rhoddwr?

Yn y DU ni fydd organau a meinwe gan roddwr posibl yn cael eu defnyddio oni bai eu bod wedi mynegi dymuniad i wneud hynny. Gallwch chi fynegi eich dymuniad mewn nifer o ffyrdd, er enghraifft drwy ddweud wrth berthynas neu ffrind agos, drwy gario cerdyn rhoddwr organau neu drwy gofnodi eich dymuniad ar Gofrestr Rhoddwyr Organau'r GIG. Bydd rhoi eich enw ar Gofrestr Rhoddwyr Organau'r GIG yn ei gwneud yn haws i'r GIG gadarnhau eich dymuniadau ac i'r rhai oedd agosaf atoch chi pan oeddech chi'n fyw i ddilyn y dymuniadau hynny.

Os na fydd eich dymuniadau'n eglur, gofynnir i'r sawl a oedd agosaf atoch chi beth fyddai eich dymuniad chi wedi bod, felly mae'n bwysig eich bod chi'n sicrhau eu bod yn ymwybodol o'ch barn chi ar roi organau.

## 13. Beth yw Cofrestr Rhoddwyr Organau'r GIG?

Mae Cofrestr Rhoddwyr Organau'r GIG,

yn llythrennol, yn achub bywydau.

Mae'n gronfa ddata gyfrinachol a gedwir ar gyfrifiadur sy'n cofnodi dymuniad dros 13 miliwn o bobl sydd wedi penderfynu eu bod am adael rhodd o fywyd i rywun arall ar ôl iddynt farw. Defnyddir y gofrestr i helpu i gadarnhau a oedd unigolyn am roi organ neu feinwe, ac os oedd, pa organau neu feinweoedd.

#### 14. A oes angen i mi gofrestru os oes gen i gerdyn rhoddwr?

Oes. Mae cardiau'n mynd ar goll neu'n difetha ac efallai na fydd eich cerdyn chi gennych chi pan eir â chi i'r ysbyty. Mae ychwanegu eich enw at y rhestr yn ffordd fwy diogel o fynegi eich dymuniad. Gallwch chi barhau i gario'r cerdyn os mynnwch chi. Cofiwch ddweud wrth eich perthnasau beth yw eich dymuniadau.

#### 15. A fydd fy enw a'm cyfeiriad yn cael eu rhoi i sefydliadau eraill?

Na fyddant. Bydd yr wybodaeth hon yn cael ei defnyddio gan wasanaeth Gwaed a Thrawsblaniadau'r GIG i gofrestru eich dymuniad ar Gofrestr Rhoddwyr Organau'r GIG a chan weithwyr gofal iechyd proffesiynol petaech chi'n marw. Ni fydd eich manylion personol yn cael eu rhoi i unrhyw unigolyn neu sefydliad heb eich caniatâd penodol chi.

#### 16. Dydw i ddim yn siŵr a wyf fi wedi cofrestru'n barod, beth ddylwn i ei wneud?

Naill ai ysgrifennwch atom i ofyn (mae natur gyfrinachol y gofrestr yn golygu na allwn ddweud wrthyhych chi dros y ffôn) neu gwnewch gais i ymuno â'r rhestr a bydd ein system yn gallu dweud a yw eich enw eisoes ar y gofrestr ac yn gallu diweddarau unrhyw fanylion perthnasol.

#### 17. Pwy fyddai'n cael fy organau a fy meinwe petawn i'n penderfynu bod yn rhoddwr?

Bydd yn rhaid i nifer o bethau gydweddu neu fod yn agos iawn at gydweddu i sicrhau trawsblaniad llwyddiannus. Rhaid ystyried ffactorau fel grŵp gwaed, oed a phwysau. Yn achos arenau, ffactor bwysig arall yw math y feinwe, sy'n fwy cymhleth na grŵp gwaed. Bydd cydweddiad perffaith yn sicrhau gwell canlyniadau.

Mae rhestr genedlaethol, a gedwir ar gyfrifiadur, wedi'i sefydlu ar gyfer cleifion sy'n aros am drawsblaniad. Bydd y cyfrifiadur yn dod o hyd i'r claf sy'n cydweddu orau ag organ sydd ar gael neu â'r uned drawsblannu lle mae'r organ ar gael. Fel arfer, rhoddir blaenoriaeth i'r cleifion sydd â'r angen mwyaf am drawsblaniad. Gwasanaeth Gwaed a Thrawsblaniadau'r GIG sy'n gyfrifol am redeg y rhestr drawsblaniadau a'r system dyrannu organau rhoddwyr. Mae'n gweithio 24 awr y dydd, bob diwrnod o'r flwyddyn, ac mae'n gwasanaethu'r DU i gyd.

Ar achlysuron prin bydd meinwe'n cael ei chydweddu, e.e. o ran maint a math y feinwe, ond fel arall mae ar gael i unrhyw glaf y mae angen trawsblaniad arno.

#### 18. A fydd rhoddwyr yn cael eu sgrinio i weld a oes ganddynt glefyd trosglwyddadwy?

Byddant. Cymerir gwaed gan bob rhoddwr posibl a chynhelir prawf i sicrhau nad oes gan yr unigolyn glefydau a feirysau trosglwyddadwy megis HIV a hepatitis. Bydd teulu'r rhoddwr posibl yn cael gwybod bod angen cynnal y prawf hwn.

#### 19. A alla i fod yn rhoddwr os oes gennyf gyflwr meddygol ar hyn o bryd?

Gallwch, yn y rhan fwyaf o amgylchiadau. Nid yw bod â chyflwr meddygol o reidrwydd

yn atal rhywun rhag bod yn rhoddwr organ neu feinwe. Gweithwyr gofal iechyd proffesiynol a fydd yn penderfynu a yw rhai o'ch organau a'ch meinwe, neu'ch holl organau a'ch meinwe, yn addas i'w trawsblannu, a byddant yn ystyried eich hanes meddygol.

Dim ond dau gyflwr sy'n golygu na ellir rhoi unrhyw organ o dan unrhyw amgylchiadau. Ni chaiff unigolyn roi organ na meinwe os oes ganddo HIV, os oes ganddo CJD neu os oes amheuaeth bod ganddo CJD.

## 20. A alla i fod yn rhoddwr os cafodd fy nghynnig i roi gwaed ei wrthod?

Gallwch. Bydd y penderfyniad ynghylch a yw unrhyw organ neu feinwe, neu bob un ohonynt, yn addas ar gyfer eu trawsblannu bob amser yn cael ei wneud gan arbenigwr, gan ystyried eich hanes meddygol. Efallai fod rhesymau penodol pam nad oedd modd i chi roi gwaed, er enghraifft, efallai eich bod wedi cael trallwysiad gwaed neu hepatitis yn y gorffennol. Neu efallai nad oedd modd i chi roi gwaed oherwydd cyflwr eich iechyd ar y pryd – weithiau bydd rhywbeth mor syml ag annwyd neu feddyginiaeth yn gallu eich rhwystro rhag rhoi gwaed.

## 21. Pwy a all ymuno â Chofrestr Rhoddwyr Organau'r GIG?

Gall pawb, waeth beth yw eu hoedran a'u hiechyd, ymuno â Chofrestr Rhoddwyr Organau'r GIG, ar yr amod eu bod yn cael eu hystyried yn gymwys yng ngolwg y gyfraith. Mae ymuno â'r Gofrestr yn ffordd o fynegi eich dymuniad i helpu eraill drwy roi organau ar gyfer eu trawsblannu ar ôl i chi farw. Ond, yn bwysicach na hynny, mae ymuno â'r Gofrestr hefyd yn ffordd o roi awdurdodiad neu ganiatâd cyfreithiol i'r trawsblannu ddigwydd.

Mae'r ffaith bod eich enw ar y Gofrestr yn rhoi caniatâd cyfreithiol i'ch organau gael eu rhoi. Caiff plant gofrestru, ond gofynnir i rieni, gwarcheidwaid neu'r rheini sydd â chyfrifoldeb rhiant drostynt gadarnhau eu caniatâd petai marwolaeth y plentyn yn golygu bod rhoi organau neu feinwe yn cael ei ystyried.

## 22. Beth fydd yn digwydd os gwnaeth fy rheini, fy ngwarcheidwad neu rywun sydd â chyfrifoldeb rhiant dros fy nghofrestru pan oeddwn yn ifanc, heb yn wybod i mi?

"Rwy'n cael llawer o gysur o wybod, os na fydd fy mab yn cael bywyd llawn, yna o leiaf bydd plentyn arall yn cael cyfle."

Mam i roddwr chwech oed

Gallwch chi ysgrifennu atom yn 'Cofrestr Rhoddwyr Organau'r GIG/NHS Organ Donor Register', Freepost RRZK-SHUX-SBCK, Gwaed a Thrawsblaniadau'r GIG/NHS Blood and Transplant, Fox Den Road, Stoke Gifford, Bryste/Bristol BS34 8RR' unrhyw bryd, i weld a yw eich manylion wedi'u cofnodi ar y Gofrestr neu i ofyn i ni ddileu eich manylion. Byddwn yn ysgrifennu atoch chi i gadarnhau ein bod ni wedi gwneud hyn.

Petai eich marwolaeth yn golygu bod rhoi organau neu feinwe yn cael ei ystyried, ac os ychwanegwyd eich enw ar y gofrestr pan oeddech yn blentyn, tynnir sylw'r staff meddygol at yr angen i ofyn caniatâd neu awdurdodiad i'r trawsblannu ddigwydd.

## 23. A all pobl hŷn fod yn rhoddwyr?

Gallant. Yn achos y llygaid a rhai mathau eraill o feinwe, nid yw oed yn gwneud gwahaniaeth. Yn achos yr organau eraill, cyflwr corfforol

yr unigolyn, ac nid ei oed, yw'r ffactor a fydd yn penderfynu p'un ai a yw'n addas. Bydd gweithwyr gofal iechyd proffesiynol arbenigol yn penderfynu ymhob achos pa organau a meinweoedd sy'n addas. Mae organau a meinweoedd pobl yn eu 70au ac 80au yn cael eu trawsblannu'n llwyddiannus.

## 24. A oes gwrthwynebiadau crefyddol i roi organau a meinweoedd?

Nac oes. Nid oes yr un o brif grefyddau'r DU yn gwrthwynebu rhoi organau a meinweoedd na thrawsblannu. Os oes gennych chi unrhyw amheuan, dylech chi eu trafod gyda'ch cynghorydd ysbrydol neu grefyddol.

## 25. A yw lliw fy nghroen yn gwneud gwahaniaeth?

"Mae fy nhrawsblaniad wedi rhoi fy mywyd yn ôl i mi. Rwyf wedi gweld fy mhlant yn tyfu i fyny a bu modd i mi fynd yn ôl i'r gwaith. Mae'r diolch i gyd i ddydd 19 oed a ddewisodd roi rhodd bywyd i rywun er nad oedd wedi cwrdd â hwy erioed o'r blaen."

Derbynnydd trawsblaniad calon

Nac ydy. Fodd bynnag, mae organau'n cael eu cydweddu yn ôl grŵp gwaed a math y feinwe (yn achos trawsblannu arenau) a'r trawsblaniadau sy'n cydweddu orau yw'r rhai mwyaf llwyddiannus. Mae cleifion o'r un grŵp ethnig yn fwy tebygol o gydweddu'n agos. Bydd nifer fach o bobl gyda mathau prin o feinwe'n gorfod derbyn organ sy'n cydweddu'n dda gan rywun o'r un tarddiad ethnig, felly mae'n bwysig bod pobl o bob cefndir ethnig yn rhoi organau.

Bydd trawsblaniadau llwyddiannus yn digwydd rhwng pobl o wahanol grwpiau ethnig pan fydd y gofynion cydweddu yn cael eu bodloni'n ddigon da.

## 26. Os oes ar rywun angen dirfawr am organ, a oes unrhyw bwrpas mewn gwneud apêl arbennig?

Oes a nac oes. Bydd unrhyw apêl arbennig yn aml yn arwain at fwy o bobl yn cytuno i fod yn rhoddwr a gall olygu y bydd nifer yr organau sydd ar gael yn cynyddu.

Fodd bynnag, ni fydd unrhyw apêl gan y teulu yn y papurau newydd ac ar y teledu yn golygu y bydd organ ar gael ar unwaith i'r sawl sy'n destun yr apêl. Bydd yr unigolyn ar y rhestr drawsblaniadau, fel pawb arall, a bydd y rheolau sy'n ymwneud â chydweddu a dyrannu organau gan roddwyr yn dal yn berthnasol.

## 27. A alla i gytuno i roi rhai organau neu feinweoedd a pheidio â rhoi rhai eraill?

Gallwch. Gallwch chi nodi pa organau yr ydych chi'n dymuno'u rhoi. Rhowch dic yn y blychau priodol ar ffurflen Cofrestr Rhoddwyr Organau'r GIG neu ar y cerdyn rhoddwyr, a dywedwch wrth y rhai agosaf atoch chi beth yw eich penderfyniad.

## 28. A alla i gytuno i roi i rai pobl a ddim i eraill?

Na allwch. Ni ellir derbyn organau a meinweoedd oni bai eu bod yn cael eu rhoi'n gwbl ddiomod. Ni ellir derbyn unrhyw amodau absoliwt gan roddwyr posibl. Yr unig gyfyngiad a dderbynnir yw pa organau neu feinweoedd fydd yn cael eu rhoi.

### 29. A allai fy organau a meinweoedd gael eu rhoi i glaf preifat?

Efallai. Mae cleifion sydd â hawl i gael triniaeth gan y GIG yn cael blaenoriaeth bob amser am organau a roddir. Mae'r rhain yn cynnwys dinasyddion y DU, aelodau Lluoedd Arfog ei Mawrhydi sy'n gwasanaethu dramor a chleifion sydd wedi eu cynnwys o fewn cytundeb iechyd cyfatebol gyda'r DU.

Ni fyddai cleifion eraill yn cael cynnig organ oni bai nad oes cleifion addas sydd â hawl i driniaeth gan y GIG ar gael. Gwneir pob ymdrech i sicrhau nad yw organ sydd wedi'i rhoi'n cael ei gwastraffu os oes rhywun a all elwa o'i chael.

Bydd meinwe sy'n cael ei rhoi ar gael i unrhyw sybyty yn y DU lle mae claf mewn angen.

### 30. A yw bod yn rhoddwr yn golygu oedi yn nhrefniadau'r angladd?

Nac ydy. Bydd y llawdriniaeth yn cael ei chynnal cyn gynted â phosibl ar ôl i'r rhoddwr farw.

### 31. A all fy organau neu feinwe gael eu rhoi i rywun mewn gwlad arall?

Gallant, efallai. Ceir cytundeb sy'n dweud os na ellir cydweddu organau gyda chleifion yn y DU y byddant wedyn yn cael eu cynnig i gleifion mewn gwledydd Ewropeaidd eraill. Yn yr un modd, bydd cleifion o'r DU yn gallu elwa o organau sy'n cael eu cynnig gan wledydd eraill o Ewrop. Mae'r cydweithrediad hwn yn golygu y bydd gwell siawns o ddod o hyd i dderbynydd addas, gan sicrhau nad yw organau gwerthfawr yn cael eu gwastraffu.

Gellir cynnig meinwe hefyd i gleifion mewn gwledydd eraill.

### 32. A yw rhoi organau a meinwe yn golygu y bydd y corff yn cael ei anffurfio?

Bydd organau a meinweoedd yn cael eu tynnu gyda'r gofal a'r parch mwyaf posibl i'r sawl a fu farw. Bydd hyn yn digwydd mewn theatr llawdriniaethau gyffredin, dan amodau di-haint gan feddygon arbenigol. Ar ôl tynnu'r organ bydd y toriad yn cael ei gau'n ofalus a'i orchuddio â dresin yn y ffordd arferol.

Gellir tynnu meinwe mewn theatr llawdriniaethau, yn y marwdy neu yn y parlwr angladdau. Bydd y llawdriniaeth yn cael ei chynnal gan weithwyr gofal iechyd proffesiynol sydd yn sicrhau bob amser bod y rhoddwr yn cael ei drin gyda'r parch a'r urddas mwyaf.

Dim ond yr organau a'r meinweoedd hynny a enwyd gan y rhoddwr neu gan eu teulu a gaiff eu tynnu.

“Rwyf wedi cael blas newydd ar fywyd. Rwy'n gallu gwneud pethau nad oeddwn i byth wedi breuddwydio y byddwn i'n gallu eu gwneud eto. Rwyf mor ddiolchgar am y cyfle a gefais gan y rhoddwr a'i deulu.”

Tad i ddau o blant, a gafodd iau/afu newydd

### 33. A fydd modd gweld y corff wedyn?

Bydd. Bydd teuluoedd yn cael cyfle i dreulio amser gyda'r ymadawedig ar ôl y llawdriniaeth os byddant yn dymuno a bydd hyn yn cael ei hwyluso gan y cydlynnydd trawsblannu. Bydd y trefniadau ar gyfer gweld y corff yr un fath ag yn achos unrhyw farwolaeth.

### 34. A oes yn rhaid i deulu'r rhoddwr dalu am gost y llawdriniaeth?

Nac oes. Ni fydd yn rhaid gwneud unrhyw daliad o gwbl. Bydd y GIG yn talu'r holl gostau sydd ynghlwm â rhoi organau neu feinwe.

### 35. A fydd y GIG yn talu costau'r angladd?

Ni fydd y GIG yn talu costau'r angladd. Bydd y teulu neu ystâd yr ymadawedig yn talu'r costau. Gall teuluoedd sy'n cael rhai budd-daliadau gael cymorth i dalu costau angladdau.

**"Roedd gwybod bod rhan ohono wedi mynd i helpu rhywun arall yn help mawr i mi wrth alaru amdano."**

Gwraig i roddwr

### 36. Mae perthynas i mi am fod yn rhoddwr. Beth fydd angen i mi ei wneud ar ôl iddynt farw?

Rhowch wybod i'r gweithwyr gofal iechyd proffesiynol sy'n gofalu am eich perthynas neu a fydd yn eich helpu'n syth ar ôl eu marwolaeth (gall hyn fod yn aelod o staff yr ysbyty, yn swyddog heddlu, yn swyddog o swyddfa'r crwner, neu'n feddyg teulu) eu bod yn dymuno rhoi organ neu feinwe. Gorau po gyntaf y byddwch chi'n rhoi gwybod i'r staff, gan y bydd hynny'n golygu ei bod yn fwy tebygol y caiff eu dymuniad ei wireddu.

### 37. A fydd yr organau neu'r meinweoedd sy'n cael eu rhoi ar gyfer eu trawsblannu yn cael eu defnyddio at ddibenion ymchwil?

Ni fydd organau a meinweoedd na ellir eu trawsblannu yn cael eu defnyddio at ddibenion ymchwil feddygol na gwyddonol oni bai fod eich teulu wedi rhoi caniatâd penodol ar gyfer hynny.

### 38. Beth yw'r gwahaniaeth rhwng rhoi organau a chadw organau?

Deilliodd problemau cadw organau oherwydd na chafwyd cydsyniad priodol gan rieni neu berthnasau i gadw organau a meinweoedd a dynnwyd mewn post-mortem er mwyn eu defnyddio ar gyfer ymchwil a dibenion eraill. O ganlyniad i'r problemau hyn, newidiwyd y gyfraith a chafodd Deddf Meinweoedd Dynol 2004 a Deddf Meinwe Dynol (yr Alban) 2006 eu cyflwyno. Dim ond os rhoddwyd caniatâd ymlaen llaw y bydd organau a meinweoedd yn cael eu tynnu er mwyn eu trawsblannu.

### 39. A alla i adael fy nghorff ar gyfer addysg neu ymchwil feddygol ar ôl i mi roi fy organau?

Na allwch. Ni dderbynnir cyrff at ddibenion addysgu os yw'r organau wedi'u rhoi neu os oes archwiliad post-mortem wedi'i gynnal. Fodd bynnag, os mai dim ond y cornbilennau a fydd yn cael eu rhoi, gellir gadael y corff at ddibenion ymchwil.

Os hoffech chi gael rhagor o wybodaeth am roi'r corff cyfan at ddibenion ymchwil neu ar gyfer archwiliadau anatomiaidd, bydd angen i chi gysylltu ag un o'r sefydliadau canlynol.

Yng Nghymru a Lloegr:  
Yr Awdurdod Meinweoedd Dynol  
Finlaison House  
15-17 Furnival Street  
Llundain/London  
EC4A 1AB  
www.hta.gov.uk

Yn yr Alban, cysylltwch â'ch ysgol feddygol agosaf:  
Aberdeen  
Yr Adran Anatomi  
Ffôn: 01224 274 320/01224 272 000

Dundee  
Y Coleg Gwyddorau Bywyd,  
Prifysgol Dundee  
Ffôn: 01382 344 206

Caeredin  
Yr Adran Gwyddorau Biofeddygol,  
Prifysgol Caeredin  
Ffôn: 0131 650 2997/0131 650 8318

Glasgow  
Yr Adran Anatomi,  
Prifysgol Glasgow  
Ffôn: 0141 330 4296/0141 339 8855

St Andrews  
Yr Adran Anatomi,  
Prifysgol St Andrews  
Ffôn: 01334 463 601

Yng Ngogledd Iwerddon:  
Yr Adran Anatomi  
Canolfan Bioleg Feddygol  
Prifysgol Queen's Belfast

97 Lisburn Road  
Belfast BT9 7BL  
Ffôn: 028 9097 2131

#### 40. A oes modd i deulu'r rhoddwr gael gwybod pwy oedd y derbynnydd?

Rhaid parchu cyfrinachedd bob amser, heblaw yn achos rhoddwyr byw lle mae'r rhoddwr a'r derbynnydd yn adnabod ei gilydd.

Os dyna yw dymuniad y teulu, gellir rhoi manylion byr iddynt megis oed a rhyw'r unigolyn neu'r bobl sydd wedi elwa o'r rhodd. Gall cleifion sy'n cael organau gael gwybodaeth debyg am y rhoddwr. Nid yw'n bosibl bob amser rhoi gwybodaeth am y derbynnydd i deulu'r rhoddwr yn achos rhai mathau o drawsblaniadau meinwe.

Weithiau bydd teuluoedd am gyfnwid llythyrâu dienw i ddiolch neu i ddymuno'n dda drwy'r cydlynwyr trawsblannu ac mewn rhai achosion bydd teulu'r rhoddwr a'r derbynnydd wedi cytuno i gyfarfod.

#### 41. Pam dylwn i drafod fy nymuniadau gyda'm teulu?

Er mwyn gwneud yn siŵr eu bod yn gwybod beth yw eich dymuniad ar ôl i chi farw ac i gadarnhau neu i helpu i roi gwybod i staff y GIG beth oedd eich dymuniadau. Petaech chi'n cofrestru eich dymuniadau heb roi gwybod i'r bobl agosaf atoch chi, gallai fod yn syndod iddynt ar adeg anodd pan fyddant yn ceisio ymdopi â'u colled.

Os ydych chi'n teimlo ei fod yn bwnc anodd ei godi, gallech chi ddechrau drwy ddefnyddio'r llyfryn hwn neu stori am drawsblaniad ar y teledu neu mewn papur newydd fel man cychwyn ar gyfer trafodaeth.

#### 42. Beth fyddai'n digwydd petai fy nheulu yn gwrthwynebu?

Gwyddom y bydd teuluoedd yn cytuno yn y rhan fwyaf o achosion os ydynt yn gwybod mai dyna

oedd dymuniad y sawl a fu farw. Os bydd teulu'r unigolyn sydd wedi marw, neu'r rheini sydd agosaf ato, yn gwrthwynebu'r bwriad i roi organ er bod yr unigolyn a fu farw wedi rhoi ei ganiatâd, naill ai drwy ddweud wrth berthnasau, wrth ffrindiau agos neu wrth staff clinigol, neu drwy gario cerdyn rhoi organau neu drwy gofrestru ei ddymuniad ar Gofrestr Rhoddwyr Organau'r GIG, bydd y gweithwyr gofal iechyd proffesiynol yn trafod y mater â hwy mewn ffordd sensitif. Byddant yn cael eu hannog i dderbyn dymuniadau'r unigolyn a fu farw ac esbonnir iddynt nad oes ganddynt hawl cyfreithiol i wrthod neu wrthwynebu'r dymuniadau hynny. Gall fod achosion, fodd bynnag, lle byddai'n amhriodol i fwrw ymlaen i roi'r organau.

#### **43. Beth fydd yn digwydd os nad oes gen i deulu na pherthnasau eraill?**

Gallwch chi ymuno â Chofrestr Rhoddwyr Organau'r GIG, ond er mwyn cyflawni eich dymuniadau ynglŷn â rhoi organau, bydd angen i weithwyr gofal iechyd proffesiynol siarad â rhywun arall adeg eich marwolaeth a all roi cyngor am eich hanes meddygol a chymdeithasol. Efallai mai eich meddyg teulu fydd yr unigolyn hwn, ond mae'n syniad da i chi hefyd ddweud wrth yr unigolyn sydd agosaf atoch chi yn eich bywyd, megis hen ffrind neu gydweithiwr agos, am eich penderfyniad.

#### **44. Beth yw perthynas gymwys?**

Os nad yw dymuniadau unigolyn a fu farw yn hysbys, mae'r Deddfau Meinweoedd Dynol yn gosod pobl yn nhrefn pwysigrwydd eu perthynas â'r sawl a fu farw. Mae hyn yn galluogi'r gweithwyr gofal iechyd proffesiynol sy'n ceisio cael caniatâd i dynnu organau i wybod â phwy y dylent gysylltu ac ym mha drefn. Mae hyn yn amrywio o ŵr neu wraig neu bartner (gan gynnwys partner sifil neu bartner o'r un rhyw); rhiant neu blentyn; brawd neu chwaer a pherthnasau eraill neu hen ffrind.

#### **45. A ddylwn i roi fy nymuniadau yn fy ewyllys?**

Na ddylech. Erbyn i'ch ewyllys gael ei darllen mae'n debygol o fod yn rhy hwyr o lawer i chi fod yn rhoddwr gan fod angen tynnu organau a meinweoedd o'r corff o fewn 48 awr ar ôl y farwolaeth. Dyna pam ei bod mor bwysig rhoi gwybod i'r rheini sydd agosaf atoch chi am eich dymuniad ac i gofnodi hynny ar Gofrestr Rhoddwyr Organau'r GIG.

#### **46. A alla i newid fy meddwl?**

Gallwch. Gallwch chi ffonio'r Llinell Rhoddwyr Organau ar 0300 123 23 23 neu fynd i'n gwefan [www.organdonation.nhs.uk/register](http://www.organdonation.nhs.uk/register) – a llenwi'r ffurflen gan ofyn i ni dynnu eich enw oddi ar y Gofrestr.

Os byddai'n well gennych chi, gallwch chi ysgrifennu i FREEPOST RRZK-SHUX-SBCK, NHSBT, Fox Den Road, Stoke Gifford, Bryste/Bristol, BS34 8RR.

Os oes gennych chi gerdyn rhoddwr organau, cofiwch ei rwygo. Dywedwch wrth eich teulu eich bod chi wedi newid eich meddwl.

#### **47. A all rhywun sydd wedi marw roi sberm neu wyau i'w defnyddio rywbryd yn y dyfodol?**

Er bod modd cael sberm neu wyau o'r corff, mae'n anghyfreithlon i'w storio neu greu embryo heb ganiatâd ysgrifenedig y rhoddwr ymlaen llaw.

#### **48. A all pobl brynu neu werthu organau?**

Na allant, mae deddfau trawsblannu'r DU yn rhoi gwaharddiad llwyr ar werthu organau neu feinweoedd dynol.

#### **49. Hoffwn i roi gwaed, beth dylwn i ei wneud?**

Mae angen gwaed drwy'r amser, ar gyfer pob math o bethau, fel triniaethau canser,

llawdriniaethau ac yn ystod genedigaethau. Mae miloedd o ganolfannau ledled y wlad lle mae sesiynau rhoi gwaed yn cael eu cynnal ac mae croeso cynnes i roddwyr newydd bob amser. Gall bron pawb sydd rhwng 17 a 60 oed ac sy'n gyffredinol iach roi gwaed.

Os ydych chi'n byw yng Ngogledd Cymru (i'r gogledd o Fachynlleth), neu yn Lloegr, cysylltwch â:

Y Gwasanaeth Gwaed Cenedlaethol  
0300 123 2323  
[www.blood.co.uk](http://www.blood.co.uk)

Os ydych chi'n byw yn Ne Cymru (sy'n cynnwys De, Canolbarth, Dwyrain a Gorllewin Cymru) cysylltwch â:

Gwasanaeth Gwaed Cymru  
0800 25 22 66  
[www.welshblood.org.uk](http://www.welshblood.org.uk) (Saesneg)  
[www.gwaedcymru.org.uk](http://www.gwaedcymru.org.uk) (Cymraeg)

Os ydych chi'n byw yn yr Alban, cysylltwch â: Gwasanaeth Trallwyso Gwaed Cenedlaethol yr Alban

0845 90 90 999  
[www.scotblood.co.uk](http://www.scotblood.co.uk)

Os ydych chi'n byw yng Ngogledd Iwerddon cysylltwch â:

Gwasanaeth Trallwyso Gwaed Cenedlaethol Gogledd Iwerddon  
028 9053 4662  
[www.nibts.org](http://www.nibts.org)

Os ydych chi'n byw yng Ngogledd Cymru (i'r gogledd o Fachynlleth), neu yn Lloegr, cysylltwch â:

Cofrestrfa Mêr Esgyrn Prydain (BBMR)  
0300 123 2323  
[www.blood.co.uk](http://www.blood.co.uk)

Os ydych chi'n byw yn Ne Cymru (sy'n cynnwys De, Canolbarth, Dwyrain a Gorllewin Cymru) cysylltwch â:

Cofrestrfa Mêr Esgyrn Cymru  
0800 371 502  
[www.welshblood.org.uk](http://www.welshblood.org.uk) (Saesneg)  
[www.gwaedcymru.org.uk](http://www.gwaedcymru.org.uk) (Cymraeg)

Os ydych chi'n byw yn yr Alban, cysylltwch â: Gwasanaeth Trallwyso Gwaed Cenedlaethol yr Alban

0845 90 90 999  
[www.scotblood.co.uk](http://www.scotblood.co.uk)

Os ydych chi'n byw yng Ngogledd Iwerddon cysylltwch â: Gwasanaeth Trallwyso Gwaed Cenedlaethol Gogledd Iwerddon

028 9053 4662  
[www.nibts.org](http://www.nibts.org)

Ceir hefyd gofrestr o bobl sy'n fodlon bod yn rhoddwyr mêr esgyrn, sy'n cael ei chadw gan Ymddiriedolaeth Anthony Nolan. Os hoffech chi wybod mwy am y gofrestr, cysylltwch â: [newdonor@anthonymolan.org.uk](mailto:newdonor@anthonymolan.org.uk)

0901 88 22 234  
[www.anthonynolan.org.uk](http://www.anthonynolan.org.uk)

## 50. Mae gen i ddiddordeb mewn rhoi mêr esgyrn, beth dylwn i ei wneud?

Heb fêr esgyrn, ni ellir cynhyrchu gwaed. Pan fydd rhywbeth yn mynd o'i le a bydd mêr esgyrn yn cael ei niweidio, er enghraifft o ganlyniad i driniaeth ar gyfer lewcmia neu ganser y gwaed, rhaid i'r claf gael trawsblaniad i oroesi.

## I ymuno â Chofrestr Rhoddwyr Organau'r GIG:

- ffoniwch y Llinell Rhoddwyr Organau ar 0300 123 23 23
- ewch i [www.organdonation.nhs.uk](http://www.organdonation.nhs.uk)
- llenwch y ffurflen gofrestru a'i dychwelyd atom. Rhowch y ffurflen mewn amlen a'i phostio i:

FREEPOST RRZK-SHUX-SBCK  
Gwasanaeth Gwaed a Thrawsblaniadau'r GIG (NHSBT)  
Fox Den Road  
Stoke Gifford  
Bryste/Bristol  
BS34 8RR

Does dim angen i chi ddefnyddio stamp, ond bydd defnyddio un yn helpu i arbed arian i ni.

Ar ôl i ni gael eich ffurflen gofrestru, bydd eich enw'n cael ei ychwanegu at Gofrestr Rhoddwyr Organau'r GIG.

Oherwydd ein bod yn cael cymaint o gofrestriadau, ni fyddwn yn cydnabod bod y ffurflen wedi ein cyrraedd ni. Fodd bynnag, os bydd angen cadarnhad ysgrifenedig arnoch chi, ysgrifennwch atom yn y cyfeiriad ar gefn y daflen hon.

**Diolch am eich cymorth.**

## Cofrestrwch fy manylion ar Gofrestr Rhoddwyr Organau'r GIG

Defnyddiwch BRIF LYTHRENNAU gan ddefnyddio beiro ddu.

\*rheid llenwi'r maes.

### Fy enw a'm cyfeiriad

Cyfenw\*

Enw(au) cyntaf\*

Dyddiad geni\* / / Dyn \* Menyw \*

Cyfeiriad\*

Cod post\*

Ffôn

Symudol

E-bost

### Fy nymuniadau

**Rwyf eisiau rhoi:** (Ticiwch y blychau perthnasol)

A. unrhyw un o'm horganau neu fy meinwe  **neu**

B. fy arenau  calon  afu/iau  coluddyn bach   
llygaid  ysgyfaint  pancreas  meinwe

**ar gyfer trawsblaniad ar ôl i mi farw.**

Llofnod

Dyddiad

Ticiwch yma os hoffech gael gwybodaeth yn y dyfodol gan Wasanaeth Gwaed a Thrawsblaniadau'r GIG am roi gwaed, organau a meinwe.

## Fy nharddiad ethnig

Mae hi'n gwy tebygol y ceir cyfatebiad agosach a thrawsblaniad llwyddiannus os daw'r rhoddwr a'r derbynnydd o'r un grŵp ethnig. Ticiwch y grŵp ethnig sy'n eich disgrifio chi orau.

### Gwyn:

Prydeinig  Gwyddelig  Arall

### Cymysg:

Caribiaidd Du/Gwyn  Asiaidd/Gwyn

Affricanaidd Du/Gwyn  Arall

### Asiaidd neu Asiaidd Prydeinig:

Indiaidd  Pacistanaidd  Bangladeshaidd  Arall

### Du neu Ddu Prydeinig:

Caribiaidd  Affricanaidd  Arall

### Cefndir cymysg arall:

Tsieineaidd  Arall

### Ni nodwyd:

---

Llenwch y ffurflen hon a'i phostio at:

FREEPOST RRZK-SHUX-SBCK,  
Gwasanaeth Gwaed a Thrawsblaniadau'r GIG  
(NHSBT),  
Fox Den Road,  
Stoke Gifford,  
Bryste/Bristol BS34 8RR

Does dim angen i chi ddefnyddio stamp, ond bydd defnyddio un yn helpu i arbed arian i ni.

## Diolch am eich cymorth a'ch cefnogaeth.

---

**Sicrwydd Diogelu Data.** Unig bwrpas llenwi'r ffurflen hon yw cofnodi eich dymuniadau i fod yn rhoddwr organau. Caiff yr holl wybodaeth a roddir i Wasanaeth Gwaed a Thrawsblaniadau'r GIG ei defnyddio'n unol â Deddf Diogelu Data 1998. Gallai eich data gael ei drin ar ein rhan mewn gwlad nad yw fel rheol yn rhwym wrth gyfraith Diogelu Data'r UE. Os felly, byddwn yn sicrhau y caiff y data ei ddiogelu yn unol â gofynion yr UE. Ceir rhagor o wybodaeth am sut yr ydym yn gofalu am eich manylion personol yn [www.nhsbt.nhs.uk](http://www.nhsbt.nhs.uk) neu drwy ffonio 0300 123 23 23.

Os ydych chi'n dymuno newid eich cofnod neu ei dynnu oddi ar Gofrestr Rhoddwyr Organau'r GIG cewch wneud hynny drwy ffonio'r Llinell Rhoddwyr Organau ar 0300 123 23 23, drwy fynd i [www.organdonation.nhs.uk/ukt/welsh/welsh.jsp](http://www.organdonation.nhs.uk/ukt/welsh/welsh.jsp) neu drwy ysgrifennu atom yn y cyfeiriad dros y ddalen.

Cyhoeddwyd gan:

Gwasanaeth Gwaed a Thrawsblaniadau'r GIG  
Fox Den Road  
Stoke Gifford  
Bryste BS34 8RR

Ffôn: 0117 975 7575

E-bost: [enquiries@organdonation.nhs.uk](mailto:enquiries@organdonation.nhs.uk)

[www.organdonation.nhs.uk/ukt/welsh/welsh.jsp](http://www.organdonation.nhs.uk/ukt/welsh/welsh.jsp)

© Gwasanaeth Gwaed a Thrawsblaniadau'r GIG 2009

# Organ and tissue donation



Your questions  
answered

For more information:

**0300 123 23 23**

[www.organdonation.nhs.uk](http://www.organdonation.nhs.uk)



# Organ and tissue donation – your questions answered.

Transplants are one of the most miraculous achievements of modern medicine. But they depend entirely on the generosity of donors and their families who are willing to make this life-saving or life-enhancing gift to others.

One donor can save the life of several people, restore the sight of two others and improve the quality of life of many more. The more people who pledge to donate their organs and tissue after their death, the more people stand to benefit. By choosing to join the NHS Organ Donor Register you could help to make sure life goes on for many others.

Joining the register records your agreement to the use of your organs and tissue for transplantation after your death.

When you register it is important that you tell those closest to you about your decision.

To decide whether or not you wish to become a donor after you have died is something very personal and it is important that everyone makes their own decision. This booklet contains answers to the most commonly asked questions about organ and tissue donation and aims to resolve any doubts you might have about leaving a legacy of life for others after you die.

## Contents

	Page
1 What is organ donation?	1
2 When were the first organ transplants?	1
3 What organs can be transplanted?	1
4 What is tissue donation?	1
5 Does joining the NHS Organ Donor Register mean I am agreeing to donate my face or limbs for transplant?	2
6 Why are even more donors needed?	2
7 How do they know you are really dead?	2
8 Can they keep you alive with machines?	3
9 Will they just let you die if they know you want to be a donor?	3
10 Can I donate if I die in the emergency department?	3
11 Can you donate an organ while you are still alive?	3
12 Why do I need to make a decision about whether to become a donor?	4
13 What is the NHS Organ Donor Register?	4
14 Do I need to register if I have a donor card?	5
15 Will my name and address be given to other organisations?	5
16 I'm not sure if I've already registered, what should I do?	5
17 Who would get my organs and tissue if I became a donor?	5
18 Are donors screened to identify if they have a transmissible disease?	5
19 Can I be a donor if I have an existing medical condition?	5
20 Can I be a donor if I have been turned down to donate blood?	6
21 Who can join the NHS Organ Donor Register?	6
22 What happens if my parents, guardian or a person with parental responsibility registered me when I was young without my knowledge?	6
23 Can older people be donors?	6
24 Are there religious objections to organ and tissue donation?	7
25 Does the colour of my skin make a difference?	7

26	If someone desperately needs an organ, is there any point in making a special appeal?	7
27	Can I agree to donate some organs or tissue and not others?	7
28	Can I agree to donate to some people and not to others?	7
29	Could my donated organs and tissue go to a private patient?	8
30	Does being a donor cause delays to funeral arrangements?	8
31	Could any of my organs or tissue be given to someone in another country?	8
32	Does donation leave the body disfigured?	8
33	Is it possible to see the body after donation?	8
34	Does a donor's family have to pay the cost of donation?	9
35	Will the NHS pay the cost of the funeral?	9
36	My relative wants to be a donor. What do I need to do when they die?	9
37	Will organs or tissue that are removed for transplant be used for research purposes?	9
38	How is organ donation different from organ retention?	9
39	Can I leave my body for medical education or research after I have donated my organs?	9
40	Would a donor's family ever know who the recipient was?	10
41	Why should I discuss my wishes with my relatives?	10
42	What will happen if my relatives object?	10
43	What if I have no family or other relatives?	11
44	What is a qualifying relationship?	11
45	Should I put my wishes in my will?	11
46	Can I change my mind?	11
47	Can a deceased person donate sperm or eggs for future use?	11
48	Can people buy or sell organs?	11
49	I am interested in giving blood, what do I do?	11
50	I am interested in donating bone marrow, what do I do?	12

## 1. What is organ donation?

Organ donation is the gift of an organ to help someone who needs a transplant. The generosity of donors and their families enables over 3,000 people in the UK every year to take on a new lease of life.

## 2. When were the first organ transplants?

The first successful kidney transplant was in 1954. The first heart transplant took place in 1967.

## 3. What organs can be transplanted?

Kidneys, heart, liver, lungs, pancreas and the small bowel can all be transplanted.

Techniques are improving all the time and we may soon be able to transplant other parts of the body to help even more people.

## 4. What is tissue donation?

Tissue donation is the gift of tissue such as corneas, skin, bone, tendons, cartilage and heart valves to help others.

The first successful cornea transplant was in 1905. Every year thousands of people with a severe eye disease or injury have their sight restored by donated corneas.

Bone, tendons and cartilage are used for reconstruction after an injury or during joint replacement surgery. A bone transplant can prevent limb amputation in patients suffering from bone cancer.

Heart valves are used to help children born with heart defects and adults with diseased or

damaged valves. Skin grafts are used to treat people with severe burns.

Most people can donate tissue. Unlike organs, it may be possible to donate tissue up to 48 hours after a person has died.

Reproductive organs and tissue are not taken from deceased donors.

"I cannot thank the donors and their relatives enough. Their gifts have given me back my sight and transformed my life."

Cornea recipient

## 5. Does joining the NHS Organ Donor Register mean I am agreeing to donate my face or limbs for transplant?

No. We would require specific agreement for these forms of donation – either from you during your lifetime or from your next of kin after death. Let those close to you know your wishes.

## 6. Why are even more donors needed?

Every day three people die while waiting for an organ transplant and many others lose their lives before they even get on to the transplant list. There is a serious shortage of organs and the gap between the number of organs donated and the number of people waiting for a transplant is increasing.

Transplants are very successful and the number of people needing a transplant is expected to rise steeply due to an ageing population, an increase in kidney failure and scientific

advances which mean that more people are now able to benefit from a transplant.

However, the number of organs available for transplant has remained static over the past five years. Only a very small number of people die in circumstances where they are able to donate their organs. Because organs have to be transplanted very soon after someone has died they can only be donated by someone who has died in hospital. Usually organs come from people who are certified dead while on a ventilator in a hospital intensive care unit, generally as a result of a brain haemorrhage, major accident like a car crash, or stroke.

The numbers of people, particularly younger people, dying in these circumstances is falling, mainly because of welcome improvements in road safety, medical advances in the treatment of patients and the prevention of strokes in younger people.

Another major reason for the shortage of organs is that many people have not recorded their wishes about donation or discussed it with their families. Too few people have joined the NHS Organ Donor Register and made sure that their families know their wishes.

While only a very few people die in circumstances which would enable their organs to be donated, many people can donate tissue after their death. Scientific and medical advances in the treatments that are available for patients has led to an increased need for donated tissue.

## 7. How do they know you are really dead?

Organs are only removed for transplantation after a person has died. Death is confirmed by

doctors at consultant level who are entirely independent of the transplant team. Death is confirmed in exactly the same way for people who donate organs as for those who do not.

Most organ donors are patients who die as a result of a brain haemorrhage, severe head injury, or stroke and who are on a ventilator in a hospital intensive care unit. In these circumstances, death is diagnosed by brain stem tests. There are very clear and strict standards and procedures for doing these tests and they are always performed by two experienced doctors.

The ventilator provides oxygen which keeps the heart beating and blood circulating after death. These donors are called heartbeating donors. Organs such as hearts, which deteriorate very quickly without an oxygen supply, are usually only donated by a heartbeating donor.

Patients who die in hospital but are not on a ventilator can, in some circumstances, donate their kidneys, and in certain circumstances, other organs. They are called non-heartbeating donors.

Both heartbeating and non-heartbeating donors can donate their corneas and other tissue.

## **8. Can they keep you alive with machines?**

---

No. The patient is dead. A ventilator keeps the body supplied with oxygen and this means the heart will continue to beat and circulate blood. This preserves the organs so they can be donated for transplant. When the ventilator is turned off the heart will stop beating within a few minutes.

## **9. Will they just let you die if they know you want to be a donor?**

---

No. Doctors have a duty of care to try to save life first. If, despite their efforts, the patient dies, organ and tissue donation can then be considered and a completely different team of donation and transplant specialists would be called in.

## **10. Can I donate if I die in a hospital emergency department?**

---

In an increasing number of hospitals, patients who die in the emergency unit can donate organs, eyes and tissue.

## **11. Can you donate an organ while you are still alive?**

---

Yes, in some cases. The shortage of organs has led to an increasing number of organ donations by living people.

The most common organ donated by a living person is a kidney as a healthy person can lead a completely normal life with only one functioning kidney. Kidneys transplanted from living donors have a better chance of long-term survival than those transplanted from people who have died. There are a number of reasons for this, the main one being that the donor is alive and healthy. Forty percent of all organ transplants are from kidney donors.

Part of a liver can be transplanted and it may also be possible to donate a segment of a lung and, in a very small number of cases, part of the small bowel. For all forms of living donor transplants the risk to the donor must be

considered very carefully. Before a living donor transplant can go ahead there are strict regulations to meet and a thorough process of assessment and discussion.

The Human Tissue Act 2004 and Human Tissue (Scotland) Act 2006, allow two new kinds of living kidney donation – paired and altruistic donation.

Donors are often a close relative but may also be individuals who are not related but have an established emotional relationship with the recipient such as a partner or close friend. Sometimes a donor and a recipient may be incompatible with each other because of blood group or tissue-type and in this case it may be possible for them to be paired with another donor and recipient in the same situation so that each recipient will benefit from a transplant that they would otherwise not have had (paired donation). Where more than two pairs are involved in the swap it is called “pooled” donation. Donors may also offer to give a kidney to someone who is on the waiting list for a transplant but whom they have never met (non-directed altruistic donation).

The Human Tissue Act 2004 established the Human Tissue Authority (HTA). One of the HTA’s roles is to regulate living donor transplants in the UK.

**"We owe our thanks to a donor family, without whose generous and selfless act on the untimely death of their child, my son would not be here today."**

Parents of boy, aged three, who received a small bowel and liver transplant

You can find out more about living kidney donation by reading our leaflet *Could I be a living kidney donor?* available from the Organ Donor Line (0300 123 23 23) or the Organ Donation website under the *How to become a donor* section.

If you would like to know more about paired/pooled or altruistic kidney donation contact your nearest kidney transplant centre. Details of kidney transplant centres are available on the Organ Donation website under the *About transplants* section.

You can find out more about the work of the HTA, including a leaflet on living donor transplants, on their website: [www.hta.gov.uk](http://www.hta.gov.uk).

## 12. Why do I need to make a decision about whether to become a donor?

In the UK organs and tissue from a potential donor will only be used if that is their wish. You can indicate your wishes in a number of ways such as telling a relative or close friend, by carrying an organ donor card or recording your wishes on the NHS Organ Donor Register. Putting your name on the NHS Organ Donor Register makes it easier for the NHS to establish your wishes and for those closest to you in life to follow them.

If your wishes are not clear, the person closest to you in life will be asked what they think you would have wanted, so it is important that you make sure they are aware of your views on organ donation.

## 13. What is the NHS Organ Donor Register?

The NHS Organ Donor Register is, quite literally,

a life-saver.

It is a confidential, computerised database which holds the wishes of more than 16 million people who have decided that, after their death, they want to leave a legacy of life for others. The register is used to help establish whether a person wanted to donate and, if so, what.

#### **14. Do I need to register if I have a donor card?**

Yes. Cards can and do get lost or damaged and you may not be carrying yours when you are taken to hospital. Adding your name to the register is a more secure way of expressing your wishes. You can still carry a card if you wish to. Don't forget to tell your relatives what your wishes are.

#### **15. Will my name and address be given to other organisations?**

No. This information will only be used by NHS Blood and Transplant (NHSBT) to register your wishes on the NHS Organ Donor Register and by health care professionals in the event of your death. Your personal details will not be passed to any individual or organisation without seeking your explicit consent.

#### **16. I'm not sure if I've already registered, what should I do?**

Either write in and ask (the confidential nature of the register means that we cannot tell you over the phone) or apply to join and our system will identify if you are already on the register and update any relevant details.

#### **17. Who would get my organs and tissue if I became a donor?**

Many things need to match or be very close to ensure a successful organ transplant. Blood group, age and weight are all taken into account. For kidneys another important factor is tissue type which is much more complex than blood grouping. The best results can be achieved if a perfect match is found.

There is a national, computerised list of patients waiting for an organ transplant. The computer will identify the best matched patient for an organ or the transplant unit to which the organ is to be offered. Normally, priority is given to patients who most urgently need a transplant. NHSBT operates the transplant list and donor organ allocation system. It works round the clock, every day of the year and covers the whole of the UK.

Tissue is very occasionally matched, eg for size and tissue type, but otherwise is freely available to any patient in need of a transplant.

#### **18. Are donors screened to identify if they have a transmissible disease?**

Yes. Blood is taken from all potential donors and tested to rule out transmissible diseases and viruses such as HIV and hepatitis. The family of the potential donor is made aware that this procedure is required.

#### **19. Can I be a donor if I have an existing medical condition?**

Yes, in most circumstances. Having a medical condition does not necessarily prevent a person from becoming an organ or tissue donor. The

decision about whether some or all organs or tissue are suitable for transplant is made by a healthcare professional, taking into account your medical history.

There are only two conditions where organ donation is ruled out completely. A person cannot become an organ or tissue donor if they have been diagnosed with HIV or have, or are suspected of having, CJD.

## 20. Can I be a donor if I have been turned down to donate blood?

Yes. The decision about whether some or all organs or tissue are suitable for transplant is always made by a specialist, taking into account your medical history. There may be specific reasons why it has not been possible to donate blood, such as having had a blood transfusion or having had hepatitis in the past. Or there may be reasons why you could not give blood because of your health at the time – sometimes a simple thing like a cold or medication that you are taking can prevent you from donating blood.

## 21. Who can join the NHS Organ Donor Register?

Everyone irrespective of age or health and who is considered legally competent can join the NHS Organ Donor Register. Joining the Register expresses a wish to help others by donating organs for use in transplantation after death but importantly, joining the Register also is a way to give legal consent or authorisation for donation to take place.

Your entry in the Register provides legal consent for the donation of your organs.

Children can register but their parents, guardians or those with parental responsibility will be asked to provide their consent should the child's death lead to donation being considered.

## 22. What happens if my parents, guardian or a person with parental responsibility registered me when I was young without my knowledge?

"I find a lot of comfort in knowing that if my son was not to have a full life, then at least another child will have the chance."

Mother of donor, aged six

You can write to us at 'NHS Organ Donor Register, Freepost RRZK-SHUX-SBCK, NHS Blood and Transplant, Fox Den Road, Stoke Gifford, Bristol BS34 8RR' at any time to check if your details are recorded on the Register or to ask us to remove your details. We will write to you to confirm that we have done this.

If in the event of your death organ donation is being considered and if your name was added to the register when you were a child the medical staff involved will be alerted to the need to approach your family to obtain appropriate consent for donation to take place.

## 23. Can older people be donors?

Yes, In the case of eyes and some other tissue, age does not matter. For other organs it is the person's physical condition, not age, which is

the deciding factor. Specialist healthcare professionals decide in each case which organs and tissue are suitable. Organs and tissue from people in their 70s and 80s are transplanted successfully.

#### **24. Are there religious objections to organ and tissue donation?**

No, none of the major religions in the UK object to organ and tissue donation and transplantation. If you have any doubts, you should discuss them with your spiritual or religious adviser.

#### **25. Does the colour of my skin make a difference?**

"My transplant gave me my life back. I have seen my children grow up and was able to get back to work. I owe all this to a 19-year-old man who wanted to give someone he had never met the gift of life."

Heart transplant recipient

No. However, organs are matched by blood group and tissue type (for kidney transplants) and the best-matched transplants have the best outcome. Patients from the same ethnic group are more likely to be a close match. A few people with rare tissue types may only be able to receive a well-matched organ from someone of the same ethnic origin, so it is important that people from all ethnic backgrounds donate organs.

Successful transplants are carried out between

people from different ethnic groups wherever the matching criteria are met.

#### **26. If someone desperately needs an organ, is there any point in making a special appeal?**

Yes and no. Any special appeal usually results in more people agreeing to become donors and can increase the number of organs available.

However, family appeals through the newspapers and television will not result in an organ immediately becoming available for the person on whose behalf the appeal was made. The patient will still be on the transplant list, just like everyone else, and the rules that govern the matching and allocation of donor organs to recipients still apply.

#### **27. Can I agree to donate some organs or tissue and not others?**

Yes. You can specify which organs you would wish to donate. Simply tick the appropriate boxes on the NHS Organ Donor Register form or on the donor card, and let those close to you know what you have decided.

#### **28. Can I agree to donate to some people and not to others?**

No. Organs and tissue cannot be accepted unless they are freely donated. No absolute conditions can be attached in terms of potential recipients. The only restriction allowed is which organs or tissue are to be donated.

### 29. Could my donated organs and tissue go to a private patient?

Possibly. Patients entitled to treatment on the NHS are always given priority for donated organs. These include UK citizens, members of Her Majesty's forces serving abroad and patients covered by a reciprocal health agreement with the UK.

Other patients would only be offered an organ if there were no suitable patients entitled to treatment under the NHS. Every effort is made to ensure that a donated organ does not go to waste if there is someone who can benefit.

Donated tissue is made available to any hospital in the UK where there is a patient in need.

### 30. Does being a donor cause delays to funeral arrangements?

No. The donation operation is performed as soon as possible after death.

### 31. Could any of my organs or tissue be given to someone in another country?

Yes, possibly. There is an agreement that any organs that cannot be matched to UK patients are offered to patients in other European countries. Likewise, UK patients benefit from organs offered by other European countries. This co-operation increases the chance of a suitable recipient being found, ensuring that precious organs do not go to waste.

Tissue might also be offered to patients in other countries.

### 32. Does donation leave the body disfigured?

Organs and tissue are always removed with the greatest of care and respect for the person. This takes place in a normal operating theatre under sterile conditions by specialist doctors. Afterwards the surgical incision is carefully closed and covered by a dressing in the normal way.

Tissue can be removed in an operating theatre, mortuary or funeral home. The operation is carried out by specialist healthcare professionals who always ensure that the donor is treated with the utmost respect and dignity.

Only those organs and tissue specified by the donor or their family will be removed.

"I've been given a new lease of life. I am able to do things I never dreamt I would be able to do again. I am so grateful for the chance that the donor and his family gave me."

Father of two, liver recipient

### 33. Is it possible to see the body after donation?

Yes. Families are given the opportunity to spend time with their loved one after the operation if they wish and this is facilitated by the transplant co-ordinator. Arrangements for viewing the body after donation are the same as after any death.

### **34. Does a donor's family have to pay the cost of donation?**

No. There is no question of any payment at all. The NHS meets the costs related to the donation of organs and tissue.

### **35. Will the NHS pay the cost of the funeral?**

The NHS will not pay the cost of the funeral. Funeral costs are met either by the family or from the person's estate. Families in receipt of certain benefits may be able to get help with the cost of funerals.

"It helped my grieving a lot to know that some part of him had gone to help someone else."

Wife of donor

### **36. My relative wants to be a donor. What do I need to do when they die?**

Inform the healthcare professionals who are involved either with your relative's care or are helping you in the immediate period following their death (this could be a member of the hospital staff, a police officer, coroner's officer, Procurator Fiscal or GP) that they wanted to donate. The earlier you are able to tell staff, the more likely it is that donation can take place.

### **37. Will organs or tissue that are removed for transplant be used for research purposes?**

Organs and tissue that cannot be used for transplant will only be used for medical or scientific research purposes if specific permission has been obtained from your family.

### **38. How is organ donation different from organ retention?**

The problems of organ retention arose because proper consent was not obtained from parents or relatives for organs and tissue removed at post-mortem to be kept for research or other purposes. As a result of these problems the law was changed and the Human Tissue Act 2004 and the Human Tissue (Scotland) Act 2006 were introduced. Organs and tissue are only removed for transplantation if permission has been given.

### **39. Can I leave my body for medical education or research after I have donated my organs?**

No. Bodies are not accepted for teaching purposes if organs have been donated or if there has been a post-mortem examination. However, if only the corneas are to be donated, a body can be left for research.

To find out more information about whole body donation for research purposes or for anatomical examination you will need to contact the following organisations.

For England and Wales:  
The Human Tissue Authority

Finlaison House  
15-17 Furnival Street  
London  
EC4A 1AB  
www.hta.gov.uk

For Scotland contact your nearest  
medical school:  
Aberdeen  
Department of Anatomy  
Tel: 01224 274 320/01224 272 000

Dundee  
College of Life Sciences,  
University of Dundee  
Tel: 01382 388 825

Edinburgh  
Department of Biomedical Sciences,  
University of Edinburgh  
Tel: 0131 650 2997/0131 650 8318

Glasgow  
The Anatomy Department,  
University of Glasgow  
Tel: 0141 330 4296/0141 339 8855

St Andrews  
Department of Anatomy,  
University of St Andrews  
Tel: 01334 463 601

For Northern Ireland:  
The Department of Anatomy  
Queen's University Belfast  
Medical Biology Centre  
97 Lisburn Road  
Belfast BT9 7BL  
Tel: 028 9097 2131

#### 40. Would a donor's family ever know who the recipient was?

---

Confidentiality is always maintained, except in the case of living donors who usually already know each.

If the family wish, they will be given some brief details such as the age and sex of the person or persons who have benefited from the donation. Patients who receive organs can obtain similar details about their donors. It is not always possible to provide recipient information to donor families for some types of tissue transplant.

Those involved may want to exchange anonymous letters of thanks or good wishes through the transplant co-ordinators and in some instances donor families and recipients have arranged to meet.

#### 41. Why should I discuss my wishes with my relatives?

---

So that they know what you would like to happen after your death and can confirm or help inform NHS staff what your wishes were. If you register your wishes without telling the people closest to you, it may come as a surprise at a time when they are trying to deal with their loss.

If you think you would find it difficult to raise the subject, you could try using this booklet or a TV or newspaper story about a transplant to start a discussion.

#### 42. What will happen if my relatives object?

---

We know that in most cases families will agree

to donation if they knew that was their loved one's wish. If the family, or those closest to the person who has died, object to the donation when the person who has died has given their explicit permission, either by telling relatives, close friends or clinical staff, or by carrying a donor card or registering their wishes on the NHS Organ Donor Register, healthcare professionals will discuss the matter sensitively with them. They will be encouraged to accept the dead person's wishes and it will be made clear that they do not have the legal right to veto or overrule those wishes. There may, nevertheless, be cases where it would be inappropriate for donation to go ahead.

#### **43. What if I have no family or other relatives?**

You can join the NHS Organ Donor Register but to fulfil your donation wishes, healthcare professionals will need to speak to someone else at the time of your death who can advise on your medical and social history. This may be your GP but it is advisable also to tell the person closest to you in life, a friend of long standing or a close colleague, about your decision.

#### **44. What is a qualifying relationship?**

Where the wishes of a person who has died are not known, the Human Tissue Acts rank people who had a relationship with them. This enables specialist healthcare professionals seeking permission for donation to know who they should approach and in what order. This ranges from a spouse or partner (including civil or same sex partner); parent or child; brother or sister and other relatives, to a friend of long standing.

#### **45. Should I put my wishes in my will?**

No. By the time your will is read it is likely to be far too late for you to become a donor because organs and tissue need to be removed within 48 hours of death. This is why it is so important to let those closest to you know your wishes and to record them on the NHS Organ Donor Register.

#### **46. Can I change my mind?**

Yes. You can ring the Organ Donor Line on 0300 123 23 23 or go to our website [www.organdonation.nhs.uk/register](http://www.organdonation.nhs.uk/register) – and fill in the form asking for your name to be removed.

If you prefer, you can write to FREEPOST RRZK-SHUX-SBCK, NHSBT, Fox Den Road, Stoke Gifford, Bristol, BS34 8RR.

If you have an organ donor card, tear it up. Let your family know that you have changed your mind.

#### **47. Can a deceased person donate sperm or eggs for future use?**

While it is possible to retrieve sperm or eggs it is illegal to store either or to create an embryo without the prior, written consent of the donor.

#### **48. Can people buy or sell organs?**

No, the transplant laws in the UK absolutely prohibit the sale of human organs or tissue.

#### **49. I am interested in giving blood, what do I do?**

Blood is needed constantly, for all kinds of

things, such as cancer treatments, operations and in child birth. There are thousands of places all over the country that hold blood donor sessions and new blood donors are always welcome. Almost anyone aged 17 to 60 years and in general good health can give blood.

If you live in England or North Wales (from Machynlleth north) contact:  
National Blood Service  
0300 123 23 23  
[www.blood.co.uk](http://www.blood.co.uk)

If you live in South Wales (which covers South, Mid, East and West Wales) contact:  
Welsh Blood Service  
0800 25 22 66  
[www.welshblood.org.uk](http://www.welshblood.org.uk) (English language)  
[www.gwaedcymru.org.uk](http://www.gwaedcymru.org.uk) (Welsh language)

If you live in Scotland contact:  
Scottish National Blood Transfusion Service  
0845 90 90 999  
[www.scotblood.co.uk](http://www.scotblood.co.uk)

If you live in Northern Ireland contact:  
Northern Ireland Blood Transfusion Service  
028 9053 4662  
[www.nibts.org](http://www.nibts.org)

If you live in England or North Wales (from Machynlleth north) contact:  
British Bone Marrow Registry (BBMR)  
0300 123 23 23  
[www.blood.co.uk](http://www.blood.co.uk)

If you live in South Wales (which covers South, Mid, East and West Wales) contact:  
Welsh Bone Marrow Donor Registry  
0800 371 502  
[www.welshblood.org.uk](http://www.welshblood.org.uk) (English language)  
[www.gwaedcymru.org.uk](http://www.gwaedcymru.org.uk) (Welsh language)

If you live in Scotland contact:  
Scottish National Blood Transfusion Service  
0845 90 90 999  
[www.scotblood.co.uk](http://www.scotblood.co.uk)

If you live in Northern Ireland contact:  
Northern Ireland Blood Transfusion Service  
028 9053 4662  
[www.nibts.org](http://www.nibts.org)

There is also a register of people willing to become bone marrow donors held by the Anthony Nolan Trust.  
To find out more about the register contact:  
[newdonor@anthonymolan.org.uk](mailto:newdonor@anthonymolan.org.uk)  
0901 88 22 234  
[www.anthonynolan.org.uk](http://www.anthonynolan.org.uk)

## 50. I am interested in donating bone marrow, what do I do?

---

Without bone marrow, blood cannot be produced. When things go wrong and the bone marrow becomes damaged, for example as a result of treatment for leukaemia or a related cancer of the blood, the patient must receive a transplant to survive.

## To join the NHS Organ Donor Register:

- call the Organ Donor Line on 0300 123 23 23
- visit [www.organdonation.nhs.uk](http://www.organdonation.nhs.uk)
- fill in the registration form and return it to us. Please put this form in an envelope and post it to:

FREEPOST RRZK-SHUX-SBCK  
NHSBT  
Fox Den Road  
Stoke Gifford  
Bristol  
BS34 8RR

You don't need to use a stamp, but doing so helps to conserve our funds.

Once your registration form has been received your name is added to the NHS Organ Donor Register.

Due to the large number of registrations we receive, we do not confirm receipt of the form. However, if you require written confirmation, please write to us at the address at the back of this leaflet.

**Thank you for your help.**

Please register my details on the  
**NHS Organ Donor Register**

Please complete in CAPITAL LETTERS using a black ballpoint pen.

\*indicates that a field must be completed.

### My name and address

Surname\*

Forename(s)\*

Date of birth\* / / Male \* Female \*

Address\*

Postcode\*

Telephone

Mobile

Email

### My wishes

**I want to donate:** (Please tick the boxes that apply)

A. any of my organs and tissue  **or**

B. my kidneys  heart  liver  small bowel   
eyes  lungs  pancreas  tissue

**for transplantation after my death.**

Signature

Date

Please tick here if you would like to receive future information about blood, organ and tissue donation from NHS Blood and Transplant.

## My ethnic origin

There's a better chance of getting a closer match and a successful transplant if the donor and recipient are from the same ethnic group. Please tick the ethnic group which best describes you.

### White:

British  Irish  Other

### Mixed:

White/Black Caribbean  White/Asian

White/Black African  Other

### Asian or Asian British:

Indian  Pakistani  Bangladeshi  Other

### Black or Black British:

Caribbean  African  Other

### Other mixed background:

Chinese  Other

**Not stated:**

---

Please fill out this form and post it to:

FREEPOST RRZK-SHUX-SBCK,  
NHSBT,  
Fox Den Road,  
Stoke Gifford,  
Bristol BS34 8RR

You don't need to use a stamp, but doing so helps to conserve our funds.

**Thank you for your help and support.**

---

**Data Protection Assurance.** Completion of this form is for the purpose of recording your wishes to become an organ donor. All information provided to NHS Blood and Transplant is used in accordance with the Data Protection Act 1998. Your data may be handled on our behalf in a country not normally covered by EU Data Protection law. If so, we will ensure that the data will be protected by the EU requirements. More information on how we look after your personal details can be found at [www.nhsbt.nhs.uk](http://www.nhsbt.nhs.uk) or by calling 0300 123 23 23.

If you wish to amend or withdraw your record from the NHS Organ Donor Register you can do so by calling the Organ Donor Line on 0300 123 23 23, visiting [www.organdonation.nhs.uk](http://www.organdonation.nhs.uk) or writing to us at the address overleaf.

Published by:

NHSBT  
Fox Den Road  
Stoke Gifford  
Bristol BS34 8RR

Tel: 0117 975 7575

Email: [enquiries@organdonation.nhs.uk](mailto:enquiries@organdonation.nhs.uk)

[www.organdonation.nhs.uk](http://www.organdonation.nhs.uk)

© NHSBT 2009